

### Laptop Borrowing Policy for Medical Students Engaged in Research

This form is to request the use of a laptop computer for research purposes. By signing this form, you agree to the following terms and conditions:

- You are a UTHSC medical student enrolled in a research program approved by the University of Tennessee Health Science Center, Erlanger Hospital and the Institutional Review Board (IRB).
- You have provided a letter from the IRB by the Primary Investigator (PI) listing your responsibilities with the project.
- You will use the laptop only for research-related activities and not for personal or commercial purposes.
- You will protect the laptop from theft, damage or loss and report any issues immediately to the research coordinator. In case of theft, the student will immediately file a report to the appropriate local law enforcement authority (University Police if on campus), Erlanger IT & UTHSC-COM—C. Numbers are provided below:

University Police (Memphis): 901-448-4444  
Erlanger Health IT: 423-778-8324  
UTHSC-COM-C: 423-778-6956

- You will comply with all university, hospital and IRB policies and regulations regarding data security, privacy and confidentiality.
- You will return the laptop in-person to the UTHSC-College of Medicine-Chattanooga UME Office within 30 days after the conclusion of your involvement in the research or when requested by UTHSC-College of Medicine Chattanooga, whichever comes first.
- Regardless if the research project is completed, you will return the laptop in-person to the UTHSC-College of Medicine-Chattanooga UME Office during regular business hours 60 days prior to your graduation date. Failure to return the laptop within this time frame will result in a hold on your diploma & transcripts.
- You will be responsible for any costs or liabilities arising from your use or misuse of the laptop. Failure to reimburse the university in a timely manner will result in a hold on your diploma & transcripts. UTHSC-COM-Chattanooga also reserves the right to notify a student's residency program of a potential issue with the student in regards to professionalism.
- You have read and agree to abide by all policies in the Student Policy on the use of University of TN Health Science Center-College of Medicine-Chattanooga provided computers.

Please fill out the highlighted information below and sign at the bottom.

**Name:** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Research Department:** \_\_\_\_\_

**Research Project:** \_\_\_\_\_

**Faculty sponsor:** \_\_\_\_\_

Laptop Model: \_\_\_\_\_

Laptop Serial Number: \_\_\_\_\_

Date Borrowed: \_\_\_\_\_

Expected Date of Return: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

You will need to obtain the attestation and signature of the PI for your project. You will need to submit the signed form and IRB approval letter to the UTHSC-COM-Chattanooga Associate Dean of Research for approval.

I have added \_\_\_\_\_ to my research program as listed above. I do wish for this student to receive a laptop to continue working with me on the research project. When the research is concluded, or I no longer require the services of the student, I will notify the UTHSC-COM-Chattanooga Associate Dean of Research immediately in order for them to begin the process of notifying the student to return the computer.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

UTHSC-COM-C Associate Dean of Research

Signature: \_\_\_\_\_

Date: \_\_\_\_\_